Sent By: IP Strategies, P.C.; To: USPTO At: 17038729306

Signature

RECEIVED CENTRAL FAX CENTER

Oct-14-04 1:04PM;

OCT 1 4 2004 PTCVSB/21 (08-03) Approved for use through 08/30/2003. OMB 0851-0031
Approved for use through 08/30/2003. OMB 0851-0031
U.S. Patent end Tredemark Office; U.S. DEPARTMENT OF COMMERCE
U.S. Patent end Tredemark Office; U.S. DEPARTMENT OF COMMERCE
U.S. Patent end Tredemark Office; U.S. DEPARTMENT OF COMMERCE
U.S. Patent end Tredemark Office; U.S. DEPARTMENT OF COMMERCE
U.S. Patent end Tredemark Office; U.S. DEPARTMENT OF COMMERCE
U.S. Patent end Tredemark Office; U.S. DEPARTMENT OF COMMERCE Filing Date 09/01/1999 TRANSMITTAL First Named Inventor Edward M. Scheidt FORM Art Unit 2131 (to be used for all correspondence after initial filing) Examiner Name Vauchan, Michael R. Attorney Docket Number Total Number of Pages in This Submission ENCLOSURES (Check all that apply) After Allowance communication to Technology Ceriter (TC) ~ Drawing(8) Fee Transmittal Form Appeal Communication to Board of Appeals and Interferences Licensing-related Papers Fee Attached Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) **Petition** Amendment/Reply Petition to Convert to a Proprietary Information Provisional Application
Power of Attorney, Revocation After Final Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please **Terminal Disclaimer** Identify below): Extension of Time Request Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Perts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Flim IP Strategies Thomas M. Champagne individual name Signature Date 10/14/2004 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Heather L. Pagella Date 10/14/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidertiality is governed by 36 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this bundle seem to the Chief Information Officer, U.S. Patient and smount of time you require to complete this form and/or suggestions for reducing this bundle seem to the Chief Information Officer, U.S. Patient and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS CONDESS, SEEM TO: Commerce for Reducing D.D. Box 1450, Alexandria, VA 22313-1450. ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Sent By: IP Strategies, P.C.;

PTO/SB/17 (10-04)
Approved for use through 07/31/2008. OMB 0851-0032

Under the Pagerwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it displays a valid OMB control number.										
FEE TRANSMITTA					Co	mplete h		`		
LEE IKWIADIAIIIIA	\L	Application Number				09/388,195				
for FY 2005		Filling Oate				09/01/1999				
Effective 10/01/2004, Patent feee are subject to annual revision	•	First Named Inventor				Edward M. Scheidt				
A	71.	Examiner Name				Vaughan, Michael R.				
Applicant claims small entity status. See 37 CFR 1.27		Art Unit				2131				
TOTAL AMOUNT OF PAYMENT (\$) 385		Attorney Docket No.				STSPT27				
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)								
Check Credit card Money Other None		DOITI			8					
Deposit Account:	Fee	Entity	Sman 700	Entity Fee		c n				
Deposit Account 501998	Cod		Code	(\$)			escription	Fee Paid		
Number	105		2051	65		_	filing fee or oath			
Appount IP Strategles	1053	2 50	2052	25	COAGL	sheet	provisional filing fee or			
The Director is authorized to: (check all that apply)	105		1053			nglish spec				
Charge fee(s) indicated below Credit any overpayments	1812		1812 : 1804				at for ex parte reexamination cation of SIR prior to			
Charge any additional fee(s) or any underpayment of fee(s)	100	820			Exam	iner action	•			
Charge fee(s) indicated below, except for the filing fee	180	5 1,840	1605	1,840*	Requ	esting publi iner action	cation of SIR after			
to the above-identified deposit account. FEE CALCULATION	125	1 110	2251	55	Exter	ation for rep	aly within first month	215		
1. BASIC FILING FEE	125	2 430	2262	215	Exter	elon for rej	oly within second month			
Large Entity Small Entity	125	3 980	2253	490	Exter	nsion for req	ply within third morth			
Fee Fee Fee Fee Fee Description Fee Paid Code (\$)	125	4 1,530	2254	765		-	ply within fourth month			
1001 790 2001 395 Utility filing fee	11	5 2,080	2255	1,040	Exter	sion for rep	ply within fifth month	170		
1002 350 2002 175 Design filing fee	140		2401			e of Appeal				
1003 550 2003 275 Plant filing fee	140	-	2402		•		upport of an appeal			
1004 790 2004 395 Reisaue filing fee	140		2403 1451		_	est for oral	te a public use proceeding			
1005 160 2005 80 Provisional filing lee	1 145		2462				- unavoidable			
8UBTOTAL (1) (\$)	11	3 1,330	2453	665			- unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSU		1 1.370	2501				(or relesue)			
Extra Claims below Fee Pal	d 150	2 490	2502		-	gn isaus feé				
Total Claims20** = X =	150	3 660	2503	330		lasue fee		<u> </u>		
Independent 3** = X	148		1460				Commissioner	\vdash		
Multiple Dependent	180		180				under 37 CFR 1.17(q)			
Large Entity Small Entity	180		180		Daga		formation Disclosure Stmt petant assignment per	\vdash		
Code (\$) Code (\$)	802	1 40	802		propt	nty (gmes i	Jumber of properties)	\longmapsto		
	180	9 790	280	9 395	Filing (37 C	a submiss FR 1.129(c	ion after final rejection a))			
1201 68 2201 44 Independent claims in excess of 3 1203 300 2203 150 Multiple dependent claim. If not paid	1 181	0 790	281	0 396	S Fore	ach additio	nal Invention to be			
1204 88 2204 44 ** Reissure independent claims					exem	rined (37 C	FR 1.129(b)) ntinued Examination (RCE)			
over onginal patent	180				•		pedited examination (ACE)	\vdash		
1205 18 2205 9 "Relianue claims in excess of 20 and over original patent	1 "~	2 000	1 '		ofa	design app	lication			
SUBTOTAL (2) (\$)		er fee (s				<u> </u>		\vdash		
**or number previously paid, if greater; For Raissues, see above		duced b	y Benic	ring F	ee P8	8	UBTOTAL (3) (\$) 385			
SUBMITTED BY							(Complete (# applicable))			
Name (Print/Type) Thomas Champagne		Registr	elion M (Agent)	36	,478		Telephone 828-253-8600			
Signature TW Re							Date 10/14/2004			
WARNING: Information on this form										

be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by S5 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. USPTO to process) an application. Confidentiality is governed by S5 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

if you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Sent By: IP Strategies, P.C.;

1005 160

SUBMITTED BY

Name (Print/Type)

2005

SUBTOTAL (1) (\$)

Thomas Champagne

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

55 Petition to revive - unavoidable

Tatephone 828-253-8600

Date

10/14/2004

685 Petition to revive - unintentional

685 Utility Issue fee (or reissue)

PTO/SB/17 (10-04) Approved for use through 07/31/2006, CMB 0851-0032
U.S. Patent and Tradement Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1985, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete If Known FEE TRANSMITTAL 09/388,195 Application Number 09/01/1999 Filing Date for FY 2005 Edward M. Scheidt First Named Inventor Effective 10/01/2004. Patent fees are subject to annual revision. Vaughan, Michael R. **Examiner Name** ✓ Applicant ctalms small entity status. See 37 CFR 1.27 Art Unit 2131 (\$) 385 STSPT27 TOTAL AMOUNT OF PAYMENT Attorney Docket No. FEE CALCULATION (continued) METHOD OF PAYMENT (check all that apply) 3. ADDITIONAL FEES Money Other Check Credit card arge Entity | Small Entity Deposit Account: Fee Code Fee Description Fae Paid (\$) Code Deposit 501998 65 Surcharge - tate filing fee or oath 1051 130 2051 Number Surcharge - late provisional filling fee or cover cheet 1052 50 2052 Deposit IP Strategies 130 Non-English specification Nama 130 1053 1053 The Director is authorized to: (check all that apply) 1812 2,520 For filing a request for ex parte reexamination 1812 2,520 Credit any overpayments Charge fes(s) indicated below 920° Requesting publication of SIR prior to Examiner action 920* 1804 1804 Charge any additional fee(s) or any underpayment of fee(s) Requesting publication of SIR after Examiner action Charge fee(s) indicated below, except for the filing fee 1805 1 8401 1805 1.840* to the above-identified deposit account. Extension for repty within first month 216 1251 110 2251 55 FEE CALCULATION 215 Extension for reply within second month 2252 1252 430 1. BASIC FILING FEE 480 Extension for reply within third month 2253 1253 980 arge Entity Small Entity Fee Paid 2254 765 Extension for reply within fourth month Fee Description 1254 1.530 Fee Fee 1,040 Extension for raply within fifth month 1255 2,080 2255 1001 790 2001 395 Utility filing fee 170 2401 170 Notice of Appeal 1401 340 Design filing fee 1002 350 2002 175 170 Filing a brief in support of an appeal 1402 340 2402 Plant filing fee 1003 550 2003 275 150 Request for oral hearing 1403 300 2403 Reissua filing fee 2004 395 1004 790 1451 1,610 Petition to institute a public use proceeding 1451 1.510 Provisional filing fee

	Extra Claims below Fee Paid	1502	490	2502	245 Design issue fee	
Total Claims	-20** = X t	1503	660	2503	330 Plant issue fee	
Independent Claims	-3** = X	1460	130	1460	130 Petitions to the Commissioner	
Multiple Depen	ndent	1607	50	1807	50 Processing fee under 37 CFR 1.17(q)	
Large Entity (Small Entity	1808	180	1806	180 Sutimission of Information Disclosure Stmt	
Fee Fee Code (\$)	Fee Fee Fee Description Code (\$)	8021	40	8021	40 Recording each patent assignment per property (times number of properties)	
1202 18	2202 g Claims in excess of 20	1809	790	2809		
1201 88	2201 44 Independent daims in excess of 3	1			•	
1203 300	2203 150 Multiple dependent claim, if not paid	1810	790	2810	395 For each additional invention to be examined (37 CFR 1.129(b))	
1204 88	2204 44 ** Reissue Independent claims over original patent	1801	790	2801	395 Request for Continued Examination (RCE)	
1205 18	2205 9 "Release ctaims in excess of 20 and over original patent	1802	900	1802	900 Request for expedited examination of a design application	
	SUBTOTAL (2) (\$) r previously pold, if greater; For Reissues, see above	Other *Redu			ting Fee Paid SUBTOTAL (3) (\$) 385	
or number	Parevidually paid, a preside, For Testaster,		_		(Complete (# applicable))	

1452

1453 1,330

1501 1,370

110

2452

2453

2501

Signature WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to tile (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete use of the use the amount of time you require to complete this form and/or suggestions for raducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

Registration No.

(Attorney/Agent)

36,478